

HOUSE BILL 660

By Sargent

AN ACT to amend Tennessee Code Annotated, Title 47
and Title 56, relative to certain claims for personal
injury.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 47-18-104(b), is amended by adding the following language as a new, appropriately designated subdivision:

() Intentionally delaying the payment of a claim for health care services provided to a claimant for personal injuries occurring or alleged to have occurred on a person's property, if the person to whom such claims have been submitted has reason to believe a valid claim for such injuries may exist, and payment has been delayed until the statutory time for filing actions for such injuries pursuant to § 28-3-104 has run. For purposes of this subdivision it shall be prima facie evidence that the person has intentionally delayed payment if such person has not disputed liability for such personal injury, has made no effort to contact the person claiming such injury, and received a claim for payment of health care services provided to the claimant at least thirty (30) days prior to the time limits established pursuant to § 56-7-109(b) for payment of health care claims;

SECTION 2. Tennessee Code Annotated, Title 56, Chapter 7, Part 1, is amended by adding the following language as a new, appropriately designated section:

Section _____. If an insurance entity receives a claim for payment for health care services provided to a person for personal injuries occurring or alleged to have occurred on the property of any person insured by the insurance entity, and if the insurance entity has reason to believe a valid claim for such injuries may exist and intentionally delays

paying such claim until the statutory time for filing an action for such injuries in accordance with § 28-3-104 has run, such action of the insurance entity shall be grounds for the commissioner to issue penalties against the insurance entity pursuant to § 56-2-305. For purposes of this section it shall be prima facie evidence that the insurance entity has intentionally delayed payment on such claims if the insurance entity has not disputed liability for such injury, has made no effort to contact the person claiming such injury, and received a claim for payment of health care services provided to the claimant at least thirty (30) days prior to the time limits established pursuant to § 56-7-109(b) for payment of health care claims.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring it.